

HEPUBLICAN PARTY

Edward D. Ryan Reports Analyst Reports Analysis Division Federal Election Commission 999 E. Street NW Washington, DC 20463

Identification Number: C00187450

Reference: July Quarterly Report (4/1/00-6/30/00)

Dear Mr. Ryan:

This letter is in response to your letter dated Nov. 29,2000.

Enclosed you will find an amended report with the corrections you requested for the description of professional services.

I have also enclosed another Statement of Organization with the current officers of the Republican Party of Louisiana. These officers were elected on June 24, 2000 and I sent a copy of the changes at that time to the Federal Election Commission. I am not sure why it is not on file but I am sending another copy for your records.

If you have any other questions, please feel free to call.

Singerely,

Sue M. Brumfield

Administrative Director

(See reverse side for instructions) 2. DATE NAME OF COMMITTEE IN FLEL (Chack if name is shanged) በ' የርፈር አ (b) Number and Street Address <u>ദിര ധന്ദ്രവാഹ</u>ർ A, IS THIS STATEMENT AN AMENDMENT? (c) City, State and ZIP Code **₩** YES □NO OF TYPE OF COMMITTEE (Chack one) (a) This committee is a principal campaign committee. (Complete the cardidate information below.) (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below (9£C 29 \$isse@sido Candidate Party AMEatlon Office Sought Name of Cardidate and is NOT an authorized committee. (c) This committee supports/opposes only one candidate; (name of condidate) ΠCCM ent to settlemmos (d) This committee is a (Democratic, Republican, etc.) (National, State or subordinate) (e) This committee is a separate segregated fund. (ii) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee. Melling Address and Name of Any Connected Relationship ZIP Code Organization or Affiliated Committee Type of Connected Organization Corporation Corporation w/o Capitel Stock Labor Organization Membership Organization Trade Association Cooperative Custodian of Records: Identify by name, address (phone number — optional) and position of the person in possession of committee books and records. Title or Position Mailing Address b Wrenucod Blvd, SteE Full Name Trespurer: List the name and address (phone number – optional) of the trespurer of the committee; and the name and address of any designated agent (e.g., assistent freasurer). Title or Position MaBing Address Full Name Wrencood Blud, Sile E MODULE LA TOXOA Banks of Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Mailing Address and ZIP Code Name of Bank, Depository, etc. I certify that I have exemitted this Statement and to the best of my inferience and buttof it is mus, correct and complimit.

TYPE OR PRINT NAME OF TREASURER

[SIGNATURE, OF TREASURER] DATE NOTE: Submission of lates, emoneous, or Incomplete information may subject the person signing this Statement to the penalties of 2 ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further Information contact: Federal Election Commission Toll-free 800-421-9530 Local 202-376-3-20

FEC FORM 1

Federal Election Commission

ENVELOPE REPLACEMENT PAGE

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PREPARER